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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	John First name N Middle name Kaaihue, III Last name and Suffix (Sr., Jr., II, III)	Jessica First name M Middle name Kaaihue Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4370	xxx-xx-2377

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Debtor 1 **John N Kaaihue, III** Debtor 2 **Jessica M Kaaihue**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	2428 Devon Avenue	If Debtor 2 lives at a different address:
		Loves Park, IL 61111 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Winnebago	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Page 3 of 63 Document Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

□ Yes.

No. Go to line 12.

bankruptcy petition.

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	tor 1 John N Kaaihue, I tor 2 Jessica M Kaaihu		Case number (if known)	
	_			
Part	Report About Any Bu	sinesses	You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code	
	it to this petition.		Check the appropriate box to describe your business:	
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			Commodity Broker (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriates. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement ns, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proceduS.C. 1116(1)(B).	of
	For a definition of small	■ No.	I am not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code.	у
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Cod	de.
Part	t 4: Report if You Own or	Have Any	y Hazardous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and	— 100.	What is the hazard?	
	identifiable hazard to public health or safety?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property? Number, Street, City, State & Zip Code	

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Debtor 1 **John N Kaaihue, III** Debtor 2 **Jessica M Kaaihue**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-81194 Doc 1 Filed 05/13/16 Entered 05/13/16 11:28:45 Desc Main Document Page 6 of 63

	tor 1 tor 2	John N Kaaihue, II Jessica M Kaaihu		Document	Case nu	mber (if known)
Part	t 6:	Answer These Questi		eporting Purposes		
	Wha	t kind of debts do have?	16a.			defined in 11 U.S.C. § 101(8) as "incurred by an
				☐ No. Go to line 16b.		
				Yes. Go to line 17.		
			16b.	Are your debts primarily business money for a business or investmen		
				☐ No. Go to line 16c.		
				☐ Yes. Go to line 17.		
			16c.	State the type of debts you owe the	at are not consumer debts or bus	iness debts
17.		you filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.	
	after	ou estimate that any exempt erty is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available		property is excluded and administrative expenses ors?
		inistrative expenses paid that funds will		■ No		
	be a	vailable for ibution to unsecured itors?		☐ Yes		
18.		many Creditors do	1 -49		□ 1,000-5,000	2 5,001-50,000
	you owe	estimate that you ?	□ 50-99		☐ 5001-10,000 ☐ 40,004,05,000	□ 50,001-100,000
			☐ 100-19 ☐ 200-99		10,001-25,000	☐ More than100,000
19.		much do you nate your assets to	= \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
		orth?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.		much do you nate your liabilities	□ \$0 - \$5		□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion
	to be			01 - \$100,000 001 - \$500.000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			+,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Part	t 7:	Sign Below				
For	you		I have exa	amined this petition, and I declare u	nder penalty of perjury that the in	formation provided is true and correct.
						ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
				ney represents me and I did not pa t, I have obtained and read the notic		s not an attorney to help me fill out this
			I request	relief in accordance with the chapte	er of title 11, United States Code,	specified in this petition.
				cy case can result in fines up to \$25		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			/s/ John	N Kaaihue, III	/s/ Jessica M	
				Kaaihue, III of Debtor 1	Jessica M K a Signature of De	
			Executed	on May 13, 2016 MM / DD / YYYY		May 13, 2016 MM / DD / YYYY

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John N Kaaihue, III Jessica M Kaaihue	Document	Cas	se number (if known)	
			-	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Theresa L. Campbell	Date	May 13, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
Theresa L. Campbell			
Printed name			
Theresa L. Campbell			
Firm name			
728 N. Main			
Rockford, IL 61103			
Number, Street, City, State & ZIP Code			
Contact phone 815-962-3787	Email address		
6209526			
Bar number & State			

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		170(41111)	III FAUE O ULUS	
Fill in this infor	mation to identify your	case:		
Debtor 1	John N Kaaihue,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihu	ie .		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
_				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,496.66
	1c. Copy line 63, Total of all property on Schedule A/B	\$	22,496.66
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	138,688.00
	Your total liabilities	\$	138,688.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,110.13
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,185.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 63 Document Debtor 1 John N Kaaihue, III Debtor 2 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,808.05

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Jessica M Kaaihue

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	75,141.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	75,141.00

	Document Page 10 of 63		
Fill in this information to identify your case			
Debtor 1 John N Kaaihue, III			
First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing) Jessica M Kaaihue First Name	Middle Name Last Name		
United States Bankruptcy Court for the: NOI	RTHERN DISTRICT OF ILLINOIS		
Case number			☐ Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Proper	ty		12/15
nformation. If more space is needed, attach a sep Answer every question.	possible. If two married people are filing together, both a parate sheet to this form. On the top of any additional paged, or Other Real Estate You Own or Have an Interest In		
. Do you own or have any legal or equitable inte	rest in any residence, building, land, or similar property?		
■ No. Go to Part 2.			
☐ Yes. Where is the property?			
	le interest in any vehicles, whether they are registe		hicles you own that
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, als	so report it on Schedule G: Executory Contracts and U		hicles you own that
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, also as a vehicle, also are constant of the constan	so report it on <i>Schedule G: Executory Contracts and U</i> vehicles, motorcycles		,
Do you own, lease, or have legal or equitable comeone else drives. If you lease a vehicle, also as a vehicle	so report it on Schedule G: Executory Contracts and U	Inexpired Leases.	nims or exemptions. Put d claims on <i>Schedule D:</i>
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, also as a vehicle	wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim	nims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, also as a vehicle	wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure	nims or exemptions. Put d claims on <i>Schedule D:</i>
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, also as a vehicle	wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the	nims or exemptions. Put d claims on <i>Schedule D:</i> his <i>Secured by Property</i> . Current value of the
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, also as a vehicle	wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the	nims or exemptions. Put d claims on <i>Schedule D:</i> his <i>Secured by Property</i> . Current value of the
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, also as a vehicle	wehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$3,403.00	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor 1 Debtor 2	John N Kaaihue, II Jessica M Kaaihue		Page 11 of 63	Case number (if known)	
<i>Exam</i> µ □ No	hold goods and furnish bles: Major appliances, fu s. Describe	iings irniture, linens, china, kitchenware		_	
	Cou	ch, bookcase, desk, bed, dressei	, dishes, cookware		\$510.00
□ No	ples: Televisions and radi	ios; audio, video, stereo, and digital equ s, cameras, media players, games	ipment; computers, print	ters, scanners; music col	lections; electronic devices
	Tele	vision, computer and printer			\$225.00
Examp		es; paintings, prints, or other artwork; bo emorabilia, collectibles	ooks, pictures, or other a	art objects; stamp, coin, c	or baseball card collections;
	Anti	que sewing machine			\$75.00
Examp No Yes 10. Fireal Exam No Yes 11. Cloth Exam	musical instruments a. Describe rms nples: Pistols, rifles, shoto b. Describe es nples: Everyday clothes, f b. Describe	c, exercise, and other hobby equipment	nt s, accessories	olf clubs, skis; canoes ar	nd kayaks; carpentry tools;
□ No	nples: Everyday jewelry, o	costume jewelry, engagement rings, wed	dding rings, heirloom jew	velry, watches, gems, go	ld, silver \$200.00
Exam ■ No □ Yes 14. Any c ■ No	iarm animals nples: Dogs, cats, birds, h	norses sehold items you did not already list,	including any health ai	ids you did not list	

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Official Form 106A/B Schedule A/B: Property page 2

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22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company *Examples*: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No

for Comelec Services

Swedish American Incentive SAVER Plans

401k

\$5.742.00

\$11,341.66

Entered 05/13/16 11:28:45 Case 16-81194 Doc 1 Filed 05/13/16 Desc Main Document Page 13 of 63 Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if known) Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2015 income tax refund of \$6,370.00 was intercepted by Department of Treasury for student loans federal \$0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Surrender or refund Beneficiary: value: Wife has life insurance through

employment - no cash surrender value

Spouse

\$0.00

	Case 10-81194	DOC 1	Document	Page 14 of 63	28.45 Desc Main
Debtor 1 Debtor 2	John N Kaaihue, III Jessica M Kaaihue			Case number	(if known)
If you a someo	terest in property that is deare the beneficiary of a living the has died. Give specific information			ed surance policy, or are currently entit	led to receive property because
Examp ■ No	against third parties, who les: Accidents, employmen Describe each claim			it or made a demand for payment to sue	
■ No	contingent and unliquidate Describe each claim	ed claims of e	every nature, includin	g counterclaims of the debtor and	rights to set off claims
■ No	ancial assets you did not Give specific information	already list			
				ny entries for pages you have atta	
Part 5: Des	scribe Any Business-Related	Property You C	Own or Have an Interest	n. List any real estate in Part 1.	
37. Do you o	own or have any legal or equi	table interest ir	n any business-related p	roperty?	
No. Go					
☐ Yes. G	So to line 38.				
	scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest In.	
■ No.	Go to Part 7.	equitable int	erest in any farm- or o	commercial fishing-related proper	ty?
□ Yes	. Go to line 47.				
Part 7:	Describe All Property You	Own or Have ar	n Interest in That You Did	Not List Above	
Examp ■ No	have other property of an oles: Season tickets, country	y club membei	•		
□ 165.	Give specific information				

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Debtor 1 John N Kaaihue, III Document Page 15 of 63

Debtor 2 Jessica M Kaaihue Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$3,403.00 Part 3: Total personal and household items, line 15 57. \$1,410.00 Part 4: Total financial assets, line 36 58. \$17,683.66 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$22,496.66 \$22,496.66 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$22,496.66

Official Form 106A/B Schedule A/B: Property page 6

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		I A A A A A A A A A A A A A A A A A A A		
Fill in this infor	mation to identify your	case:		
Debtor 1	John N Kaaihue,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihu	ıe		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$3,403.00	•	\$3,403.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$510.00		\$510.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$225.00		\$225.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$75.00		\$75.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$400.00		\$400.00	735 ILCS 5/12-1001(a)
	\$3,403.00 \$510.00 \$75.00	\$3,403.00	\$3,403.00 \$3,403.00 \$3,403.00 \$510.00 \$510.00 \$225.00 \$100% of fair market value, up to any applicable statutory limit \$225.00 \$75.00 \$75.00 \$75.00 \$100% of fair market value, up to any applicable statutory limit

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John N Kaaihue, III Debtor 1 Jessica M Kaaihue Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding ring 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: Members Alliance Credit** 735 ILCS 5/12-1001(b) \$595.00 \$595.00 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit **Savings: Members Alliance Credit** 735 ILCS 5/12-1001(b) \$5.00 \$5.00 Union Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401k: HK Financial Services as Plan 735 ILCS 5/12-1006 \$5,742.00 \$5,742.00 **Administrator for Comelec Services** Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401k: Swedish American Incentive 735 ILCS 5/12-1006 \$11,341.66 \$11,341.66 **SAVER Plans** Line from Schedule A/B: 21.2 100% of fair market value, up to

	Link	s ilom concadic /v.b. = ···=	any applicable statutory limit
3.		you claiming a homestead exemption of more than \$160,375? bject to adjustment on 4/01/19 and every 3 years after that for case	s filed on or after the date of adjustment.)
		No	
		Yes. Did you acquire the property covered by the exemption within	n 1,215 days before you filed this case?
		□ No	
		☐ Yes	

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		IAAAIII		
Fill in this infor	mation to identify your	case:		
Debtor 1	John N Kaaihue,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihu	ie		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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0.	doc 10 01104 Doc	Document	Page 19 of 63	40 Describant
Fill in this infor	rmation to identify your case:			
Debtor 1	John N Kaaihue, III			
	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihue			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the: NO	RTHERN DISTRICT OF IL	LINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 106E/F			
Schedule I	E/F: Creditors Who	Have Unsecured	l Claims	12/15
Schedule D: Credi left. Attach the Co name and case nu	itors Who Have Claims Secured b ontinuation Page to this page. If your number (if known).	by Property. If more space is ou have no information to re	Do not include any creditors with partially so needed, copy the Part you need, fill it out, report in a Part, do not file that Part. On the to	number the entries in the boxes on the
	All of Your PRIORITY Unsecu			
	tors have priority unsecured clair	ns against you?		
No. Go to	Part 2.			
Yes.	AU - (V - ···· NONDDIODITY II ···			
	All of Your NONPRIORITY Uns			
_ '	tors have nonpriority unsecured of			
□ No. You h	ave nothing to report in this part. Su	bmit this form to the court with	1 your other schedules.	
Yes.				
unsecured cla	aim, list the creditor separately for ea	ach claim. For each claim liste	he creditor who holds each claim. If a creditor, identify what type of claim it is. Do not list clathave more than three nonpriority unsecured claim.	ims already included in Part 1. If more
				Total claim
4.1 AFNI		Last 4 digits of acc	count number	\$184.00
•	ity Creditor's Name	When was the deb	at incurred?	
	gate, MI 48195	When was the dea		
	Street City State Zlp Code	As of the date you	ifile, the claim is: Check all that apply	
	urred the debt? Check one.	_		
☐ Debto	-	Contingent		
■ Debto	•	☐ Unliquidated		
	or 1 and Debtor 2 only	Disputed	RITY unsecured claim:	
	ast one of the debtors and another	По	ixi i unsecureu ciann.	
⊔ Chec debt	k if this claim is for a community		ing out of a separation agreement or divorce the	at vou did not
Is the cla	aim subject to offset?	report as priority cla		··· • • · · · · · · · · · · · · · · · ·
■ No		•	n or profit-sharing plans, and other similar debt	S
☐ Yes		Other. Specify	Collection	

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Jessica M Kaaihue	Case number (if know)				
ARS National Services Nonpriority Creditor's Name	Last 4 digits of account number	\$1,474.00			
P O Box 463023 Escondido, CA 92046	When was the debt incurred?				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	Other Specify Collection				
Atg Credit Llc	Last 4 digits of account number 3226	\$888.00			
Nonpriority Creditor's Name 1700 W Cortland St Ste 2	When was the debt incurred?				
Chicago, IL 60622 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
□Yes	■ Other. Specify Collection for Radiology Consultants Of Rockf				
Capital One	Last 4 digits of account number 5052	\$1,462.00			
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?				
Po Box 30285 Salt Lake City, UT 84130					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Credit Account				

Debtor 1 John N Kaaihue, III

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if know) \$3,129.00 4.5 Cardmemeber services Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P O Box 790084 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Collection ☐ Yes 4.6 **CBE Group** Last 4 digits of account number \$184.00 Nonpriority Creditor's Name When was the debt incurred? 1309 Technology Parkway Cedar Falls, IA 50613 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.7 **Central Credit Services** Last 4 digits of account number \$779.00 Nonpriority Creditor's Name When was the debt incurred? 20 Corporate Hills Dr. Saint Charles, MO 63301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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2 Jessica M Kaaihue	Case number (if know)	
Chase Card Services	Last 4 digits of account number 9395	\$1,473.00
Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	
Wilmington, DE 19850	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Account	
CMRE Financial Services	Last 4 digits of account number 0413	\$1,084.00
Nonpriority Creditor's Name		. ,
3075 E Imperial Hwy	When was the debt incurred?	
Suite 200 Brea, CA 92821		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Collection for Georgia Inpatient Medicine Assoc Assoc	
Comenity Bank/Maurices	Last 4 digits of account number 1041	\$289.00
Nonpriority Creditor's Name Po Box 182125	When was the debt incurred?	
Columbus, OH 43218 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit account	

Debtor 1 John N Kaaihue, III

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Debtor 2 Jessica M Kaaihue Case number (if know) 4.1 **Creditors Protection S** 3612 \$21.983.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 4115 When was the debt incurred? Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection for Swedishamerican Health** System, Rockford Anesthesiologists, Rockford Health Physicians, Rockford Orthopedic, OrtholL, Central Credit Other. Specify ☐ Yes Services 4.1 Diversified Consultants, Inc. \$184.00 Last 4 digits of account number 2 Nonpriority Creditor's Name P O Box 1117 When was the debt incurred? Charlotte, NC 28201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection 4.1 **Dynia & Associates** \$613.00 Last 4 digits of account number Nonpriority Creditor's Name 4849 N. Milwaukee Ave., Ste. 801 When was the debt incurred? Chicago, IL 60630 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection

Debtor 1 John N Kaaihue, III

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if know) 4.1 Elan Financial Service 0749 \$3.128.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 108 When was the debt incurred? St Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Account ☐ Yes 4.1 **ERC** \$150.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P O Box 23870 When was the debt incurred? Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection 4.1 Fenton & McGarvey Law Firm \$613.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2401 Gault Parkway When was the debt incurred? Louisville, KY 40223 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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	or 1 John N Kaaihue, III or 2 Jessica M Kaaihue		Case number (if know)	
4.1 7	Glhegc	Last 4 digits of account number	7777	\$41.00
	Nonpriority Creditor's Name		Omenad FIOA/AF Loot Active	
	Po Box 7859 Madison, WI 53707	When was the debt incurred?	Opened 5/01/15 Last Active 3/28/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa	II U.S. Bank	
4.4				
4.1 8	Global Credit & Collection	Last 4 digits of account number		\$1,113.00
	Nonpriority Creditor's Name 5440 N. Cumberland Ave., Ste. 300	When was the debt incurred?		
	Chicago, IL 60656 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.1 9	Great Lakes Higher Educucation	Last 4 digits of account number	7777	\$66.00
9	Guar Nonpriority Creditor's Name	Last 4 digits of account number		Ψ00.00
	Po Box 7859	When was the debt incurred?		
	Madison, WI 53707	A control of the discount of t		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	IS: Check all that apply	
	Debtor 1 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt		protion agreement or diverse that did ===	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	Other. Specify		
		Educationa	Il Ioan through Pnc Bank Na	

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if know) 4.2 \$184.00 IC System, Inc. Last 4 digits of account number 0 Nonpriority Creditor's Name 444 Highway 96 East When was the debt incurred? P. O. Box 64887 Saint Paul. MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.2 **Infinity Healthcare** \$1,085.00 Last 4 digits of account number Nonpriority Creditor's Name P O Box 3261 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical services ☐ Yes 4.2 Iowa Student Loan 0002 \$26,341.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attention: Bankruptcy Po Box 7150 Des Moines, IA 50309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify **Educational loan**

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Debtor 2 Jessica M Kaaihue Case number (if know) 4.2 Jefferson Capital Systems, LLC 3003 \$612.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 16 Mcleland Rd When was the debt incurred? Saint Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit account ☐ Yes 4.2 L. J. Ross Associates \$102.00 Last 4 digits of account number Nonpriority Creditor's Name P O Box 6099 When was the debt incurred? Jackson, MI 49204 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection 4.2 Midland Credit Mana \$1,113.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P O Box 2121 When was the debt incurred? Warren, MI 48090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

Debtor 1 John N Kaaihue, III

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Debtor Debtor	1 John N Kaaihue, III 2 Jessica M Kaaihue		Case number (if know)	
4.2 6	Midland Funding	Last 4 digits of account number	5018	\$1,112.00
	Nonpriority Creditor's Name 2365 Northside Dr Suite 300 San Diego, CA 92108 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	ne of the date yearne, the claim	S. Chook an that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	for Ge Capital Retail Bank	
4.2	National Bond Collection	Last 4 digits of account number		\$779.00
	Nonpriority Creditor's Name P O Box 1381	When was the debt incurred?		
	Wilkes Barre, PA 18703 Number Street City State Zlp Code	_		
	Who incurred the debt? Check one.	As of the date you file, the claim	в. Спеск ан тлат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.2	Nationwide Credit Corporation Nonpriority Creditor's Name	Last 4 digits of account number		\$3,908.00
	P O Box 9156 Alexandria, VA 22304	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other Specify Collection		
		· · · ———		

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if know) 4.2 Northland Group, Inc. \$6.258.00 Last 4 digits of account number 9 Nonpriority Creditor's Name P. O. Box390846 When was the debt incurred? Edina, MN 55439 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection 4.3 **Pedatrix Medical Group** \$172.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P O Box 88087 When was the debt incurred? Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical services ☐ Yes 4.3 **Professional Bureau of Collections** \$113.00 Last 4 digits of account number Nonpriority Creditor's Name P O Box 628 When was the debt incurred? Elk Grove, CA 95759 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if know) 4.3 **Rockford Associated Pathologists** \$8.00 Last 4 digits of account number 2 Nonpriority Creditor's Name P O Box 71082 When was the debt incurred? Chicago, IL 60694 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical services 4.3 **Rockford Memorial Hospital** \$250.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P. O. Box 14125 When was the debt incurred? Rockford, IL 61105-4125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical services ☐ Yes 4.3 **Rockford Mercantile** 4505 \$1,226.00 Last 4 digits of account number Nonpriority Creditor's Name 2502 S. Alpine Rd When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Osf St Anthony Medical Ctr ☐ Yes

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Debtor 2 Jessica M Kaaihue Case number (if know) 4.3 \$958.00 **State Collection Service** 8318 Last 4 digits of account number 5 Nonpriority Creditor's Name Po Box 6250 When was the debt incurred? Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for University Of Wi Hospital CI ☐ Yes 4.3 Swedish American Medical Group \$379.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2550 Charles St. When was the debt incurred? P. O. Box 1567 Rockford, IL 61110-0067 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical services ☐ Yes 4.3 Synchrony Bank/PayPal Cr 8715 \$549.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Po Box 103104 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit account ☐ Yes

Debtor 1 John N Kaaihue, III

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue Case number (if know) 4.3 **Torres Crdit** 3833 \$103.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? Tcs Inc. Po Box 189 Carlisle, PA 17013 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Commonwealth Edison Co ☐ Yes 4.3 **United Recovery Systems** \$3,129.00 Last 4 digits of account number 9 Nonpriority Creditor's Name P. O. Box 722929 When was the debt incurred? Houston, TX 77272-2929 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes 4.4 **Us Bank** 4173 \$1,257.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? **Cb Disputes** Saint Louis, MO 63166 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit account ☐ Yes

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	1 John N Kaaihue, III 2 Jessica M Kaaihue	Case number (if know)	
1	Us Dept of Ed/Great Lakes Education	Last 4 digits of account number 8581	\$48,693.00
	Nonpriority Creditor's Name 2401 International Madison, WI 53704	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	☐ Other. Specify	
		Educational	
1			
4.4	Velocity	Last 4 digits of account number	\$613.00
	Nonpriority Creditor's Name 1800 Route 34 No., Ste. 404A Wall, NJ 07719	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
-	Virtuoso Sourcing Grou	Last 4 digits of account number 4458	\$907.00
	Nonpriority Creditor's Name 4500 E Cherry Creek Sout Denver, CO 80246	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Pendrick Capital Partners	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue		Case number (if know)
Name and Address Central Credit Services	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims
9550 Regency Square Blvd. Jacksonville, FL 32225		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Commonwealth Edison	On which entry in Part 1 or Part 2 did y Line 4.38 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Claims 3 Lincoln Center		Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook Terrace, IL 60181	Last 4 digits of account number	
Name and Address Georgia Inpatient Medicine Assoc.	On which entry in Part 1 or Part 2 did y Line 4.9 of (<i>Check one</i>):	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
1401 E. State Street Rockford, IL 61104		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Mutual Management Services	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
7177 Crimson Ridge Dr., Ste. 10 Rockford, IL 61107-6235		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address OrtholL	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
524 Roxbury Rockford, IL 61107-6000		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address OSF St. Anthony's Hospital	On which entry in Part 1 or Part 2 did y Line 4.34 of (Check one):	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Credit/Collection Department 5666 E. State St.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61108-2472	Last 4 digits of account number	
Name and Address Radiology Consultants of Rockford	On which entry in Part 1 or Part 2 did y Line 4.3 of (<i>Check one</i>):	vou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 4542 Rockford, IL 61110		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Rockford Anesthesiologist	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Associate P. O. Box 4569		■ Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61110-4569	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Rockford Health Physicians Dept. CH 10862	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Palatine, IL 60055-0862	Last 4 digits of account number	— Fait 2. Ordators with Nonpriority discourse diamins
Name and Address Rockford Orthopedic Assoc.	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims
535 Roxbury Rd. Rockford, IL 61107		■ Part 2: Creditors with Nonpriority Unsecured Claims
Nooniola, IL 01101	Last 4 digits of account number	
Name and Address Swedish American Hospital	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	vou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
P. O. Box 4447	s. (s. ss. sno).	Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61110-0948	Last 4 digits of account number	

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Debtor 1 John N Kaaihue, III Debtor 2 Jessica M Kaaihue		Case number (if know)			
Name and Address	On which entry in Part 1 or Part 2 d	rt 2 did you list the original creditor?			
University of Wisconsin Clinic	Line 4.35 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
1 S. Park St. Madison, WI 53715		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Wadison, Wi 33713	Last 4 digits of account number				
Name and Address	e and Address On which entry in Part 1 or Part 2 did you list the original creditor?				
University of Wisconsin Hospital	Line 4.35 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
635 Science Drive Madison, WI 53711-1074		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Wadison, Wi 337 11-1074	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 75,141.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 63,547.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 138,688.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	John N Kaaihue,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihu	ıe		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	Oity		State	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 37 d	of 63
Fill in this	information to identify your	case:		
Debtor 1	John N Kaaihue,	III		
DODIO! !	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihu	ie		
(Spouse if, filir	ng) First Name	Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numl	ber			☐ Check if this is an
()				amended filing
Officia	I Form 106H			
Sched	lule H: Your Cod	ehtors		12/15
Jenea	iale II. Tour oou	CDIOIS		12/13
■ No	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.
☐ Yes	3			
	hin the last 8 years, have you a, California, Idaho, Louisiana,			ry? (Community property states and territories include ington, and Wisconsin.)
_	Go to line 3. s. Did your spouse, former spouse.	use, or legal equivalent live	e with you at the time?	
in line Form out Co	e 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 06G). Use Schedule D, Schedule E/F, or Schedule G to fill Column 2: The creditor to whom you owe the debt
1	Name, Number, Street, City, State and Zl	P Code		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule C, line
=				
	Number Street City	State	ZIP Code	
	o.i.y	Cialo	2 0000	
				_
3.2	Nome			Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
	City	State	ZIP Code	

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Fill	in this information to	identify your ca	ase:			
Del	otor 1	John N Kaai	hue, III			
	otor 2 ouse, if filing)	Jessica M K	aaihue			
Uni	ted States Bankrupt	cy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		
Cas	se number				Check if this is:	
(If kr	nown)				☐ An amended filing	
					A supplement showing postp 13 income as of the following	
	fficial Form				MM / DD/ YYYY	
S	chedule I: \	our Ince	ome			12/15
sup spo atta	plying correct inforuse. If you are sepa ch a separate shee	mation. If you arated and you	are married and not filing wi	ng jointly, and your spouse is livi th you, do not include information	and Debtor 2), both are equally re ing with you, include information on about your spouse. If more spa I case number (if known). Answer	about your ace is needed,
1.	Fill in your emplo	yment		Debtor 1	Debtor 2 or non-filing sp	ouse
	If you have more t			■ Employed	■ Employed	
	attach a separate information about		Employment status	☐ Not employed	☐ Not employed	
	employers.		Occupation	Radio service technician	Patient Care Technici	an
	Include part-time, self-employed wor		Employer's name	Comelec Services	Swedish American H	
	Occupation may ir or homemaker, if it		Employer's address	4190 Pennsylvania Ave. Dubuque, IA 52001	1401 E. State St. Rockford, IL 61104	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

10 years

15 years

0.00

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,036.95 1,771.21 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 3,036.95 1,771.21

How long employed there?

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	John N Kaaihue, III Jessica M Kaaihue			Case	e number (<i>if kno</i>	own)				
					Fo	r Debtor 1			or Debtor on-filing s		
	Cop	by line 4 here	4.		\$_	3,036.	95	\$,771.21	- -
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	714.	57	\$		299.26	
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$	0.	00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	122.	81	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.	.00	\$		0.00	
	5e.	Insurance	56		\$_	26.		\$		358.41	_
	5f.	Domestic support obligations	5f		\$_		.00	\$		0.00	_
	5g.	Union dues	50	-	\$_		.00	\$		0.00	_
•	5h.	Other deductions. Specify: Federal Garnishment - Student loan		า.+	· -		.00			176.87	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	863.		\$		834.54	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,173.	46	. \$		936.67	<u>.</u>
8.	List 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$_	0.	.00	\$		0.00	_
	8b.	Interest and dividends	8b	ο.	\$_	0.	.00	\$		0.00	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C .	\$	0.	.00	\$		0.00	
	8d.	Unemployment compensation	80		\$		00			0.00	_
	8e.	Social Security	86	∍.	\$	0.	.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		.00	\$		0.00	_
	8g.	Pension or retirement income	80		\$_		.00	\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8r	า.+	\$_	0.	.00	+ \$		0.00	<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.	.00	\$		0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,173.46	۹ ـ		936.67	= \$	3,110.13
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		2,173.40			330.07	- 1	3,110.13
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep						n Schedul	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies								\$	3,110.13
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No									
	П	Yes. Explain:									

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Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	John N Kaai	hue, III				eck if this is:	
Deh	otor 2	Jessica M K	aaibua				An amended filing	wing postpetition chapter
	ouse, if filing)	Jessica IVI N	aamue			Ц	13 expenses as of	
Unit	ted States Bank	ruptcy Court for the	: NORTI	HERN DISTRICT OF ILLIN	NOIS		MM / DD / YYYY	
Cas	se number							
l	nown)							
0	fficial Fo	orm 106J						
		J: Your	 Exper	ises				12/15
Be info	as complete ormation. If n	and accurate as	s possible eded, atta	. If two married people a ach another sheet to this				or supplying correct
		ribe Your House	hold					
1.	Is this a joi							
	□ No. Go to	o line 2. e s Debtor 2 live i	in a sonaı	rate household?				
	= 1es. Do		iii a sepai	ate nousenoid:				
	_ `		st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate House	hold of Del	btor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the			_			□ No
	dependents	names.			Son		6 months	■ Yes □ No
					Daughter		2 years	■ Yes
							<u></u>	□ No
								Yes
								□ No □ Yes
3.	Do your ex	penses include		l _{No}				□ 165
		of people other to d your depende	han _	l Yes				
Est exp	imate your e	a date after the l	our bankr	ly Expenses uptcy filing date unless cy is filed. If this is a sup				
the	lude expense value of suc ficial Form 1	h assistance an	non-cash d have in	government assistance cluded it on <i>Schedule I:</i>	if you know Your Income		Your exp	enses
4.	The rental	or home owners	hip exper	nses for your residence.	Include first mortgage	e .	•	0.00
	payments a	nd any rent for th	e ground o	or lot.		4.	D	0.00
	If not inclu	ded in line 4:						
		estate taxes		uto (4a.	·	0.00
	•	erty, homeowner's e maintenance re	•	r's insurance upkeep expenses		4b. 4c.	· ———	0.00
		eowner's associat				4c. 4d.	:	0.00
5.				our residence, such as ho	ome equity loans	5.	·	0.00

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Debtor 2 Debtor 2			Casa num	har (if Imaum)	
J U UIUI 2	2 Jessica M	Naamue	Case num	ber (if known)	
6. Uti	lities:				
6a.	Electricity, h	eat, natural gas	6a.	\$	0.00
6b.	Water, sewe	er, garbage collection	6b.	\$	0.00
6c.	Telephone,	cell phone, Internet, satellite, and cable services	6c.	\$	100.00
6d.	Other. Spec	ify:	6d.	\$	0.00
. Fo	od and housel	keeping supplies	7.	\$	700.00
Ch	ildcare and ch	ildren's education costs	8.	\$	1,200.00
. Clo	othing, laundry	, and dry cleaning	9.	\$	70.00
0. Pe	rsonal care pro	oducts and services	10.	\$	140.00
1. M e	dical and dent	al expenses	11.	\$	250.00
2. Tra	ansportation. I	nclude gas, maintenance, bus or train fare.		_	250.00
	not include car		12.	\$	350.00
		ubs, recreation, newspapers, magazines, and b		\$	50.00
		butions and religious donations	14.	\$	0.00
	surance.				
		urance deducted from your pay or included in lines		¢	0.00
	 a. Life insuran b. Health insur 		15a.		0.00
			15b.	·	0.00
	c. Vehicle insu		15c.	·	70.00
	d. Other insura		15d.	\$	0.00
	xes. Do not incl ecify:	ude taxes deducted from your pay or included in lir	nes 4 or 20. 16.	¢	0.00
	stallment or lea	no novemento.	10.	Ψ	0.00
	a. Car paymer		17a.	\$	0.00
		nts for Vehicle 2	17b.	·	0.00
		ify: Student loans	17c.	\$	115.00
	d. Other. Spec		17d.	\$	0.00
		f alimony, maintenance, and support that you d		Ψ	0.00
		our pay on line 5, <i>Schedule I, Your Income</i> (Office		\$	0.00
		you make to support others who do not live with		\$	0.00
	ecify:	•••	19.	-	
0. Ot l	her real proper	ty expenses not included in lines 4 or 5 of this	form or on Schedule I: Yo	our Income.	
20	a. Mortgages	on other property	20a.	\$	0.00
201	o. Real estate	taxes	20b.	\$	0.00
200	c. Property, ho	meowner's, or renter's insurance	20c.	\$	0.00
200	d. Maintenanc	e, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeownei	's association or condominium dues	20e.	\$	0.00
1. O tl	her: Specify:	cigarettes	21.	+\$	140.00
	-	onthly expenses		•	0.405.00
	a. Add lines 4 th		-l F 400 l 0	\$	3,185.00
221	o. Copy line 22	(monthly expenses for Debtor 2), if any, from Offici	ai Form 106J-2	\$	
220	c. Add line 22a	and 22b. The result is your monthly expenses.		\$	3,185.00
3. C a	Iculate vour m	onthly net income.			
	-	2 (your combined monthly income) from Schedule I	. 23a.	\$	3,110.13
		nonthly expenses from line 22c above.	. 23b.		3,185.00
201	c. Copy your r	, 3Aponoso nom ino 220 abovo.	200.	Ť	3,103.00
230	c. Subtract voi	ur monthly expenses from your monthly income.			
_5		s your monthly net income.	23c.	\$	-74.87
		,			
		increase or decrease in your expenses within			
		expect to finish paying for your car loan within the year or rms of your mortgage?	do you expect your mortgage	payment to increase	e or decrease because of a
		inis or your mortgage:			
	No.				
	Yes.	Explain here:			

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Fill in this info	rmation to identify your	case.			
Debtor 1	John N Kaaihue, First Name	Middle Name	Last Name		
Debtor 2	Jessica M Kaaihu	ie			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DISTRIC	Γ OF ILLINOIS		
Case number					
(if known)				_	eck if this is an ended filing
	m 106Dec				
Declara	tion About a	ın Individua	Debtor's Scho	edules	12/15
	18 U.S.C. §§ 152, 1341, 1 gn Below	519, and 3571.			·
Did you p	ay or agree to pay some	one who is NOT an atto	rney to help you fill out bank	cruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Declaration, and Signature	•
that they a	alty of perjury, I declare ire true and correct. hn N Kaaihue, III	that I have read the sun	nmary and schedules filed w X /s/ Jessica M		
	N Kaaihue, III		Jessica M Kaa		
	ure of Debtor 1		Signature of Deb	otor 2	
Date	May 13, 2016		Date May 13	, 2016	

Fill in this info	mation to identify your				
	mation to identify your				
Debtor 1	John N Kaaihue, First Name	Middle Name	Last Name		
Debtor 2	Jessica M Kaaih		Land		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case number					
(if known)				_	Check if this is an Imended filing
					inionaca ming
Official Fo	orm 107				
		Affaire for Individ	luals Eiling for B	ankruntov	4/4.0
		Affairs for Individ			4/16
				equally responsible for sup additional pages, write you	
number (if know	n). Answer every ques	stion.			
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. What is you	ur current marital statu	s?			
=					
■ Marrie □ Not ma	-				
		Para di anno di anno adi andi anno			
2. During the	last 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
Yes. L	ist all of the places you li	ved in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
Debtor 1 F	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3007 Bro Rockford		From-To: 2012 to June 2015	■ Same as Debtor	ı	■ Same as Debtor 1 From-To:
states and territo No Yes. N	ries include Arizona, Cal	ifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Part 2 Expla	ain the Sources of You	r Income			
Fill in the to	tal amount of income you	nployment or from operating a received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?
□ No					
Yes. F	ill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	1 of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,577.69	■ Wages, commissions, bonuses, tips	\$7,431.85
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affa	airs for Individuals Filing for B	· -	page 1

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John N Kaaihue, III Debtor 1 Debtor 2 Jessica M Kaaihue Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$33,577.61 \$14,809.01 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$33,411.72 \$16,480.81 Wages, commissions. Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Total amount

paid

Amount vou

still owe

Dates of payment

Creditor's Name and Address

Was this payment for ...

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John N Kaaihue, III

Del	otor 2	Jessica M Kaaihue			Cas	se number (ii	known)	
7.	Inside of wh	in 1 year before you filed for bankrupt ers include your relatives; any general pa ich you are an officer, director, person in siness you operate as a sole proprietor. 1 iny.	artners contr	s; relatives of any ger ol, or owner of 20% o	neral partners; partners or more of their voting	erships of wl g securities;	nich you are a gener and any managing	al partner; corporation agent, including one fo
		No						
		Yes. List all payments to an insider.						
	Insid	der's Name and Address	Dat	es of payment	Total amount paid	Amount still	•	r this payment
3.	insid	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos	-		ments or transfer a	any propert	y on account of a c	lebt that benefited an
	= 1	No						
		Yes. List all payments to an insider						
	Insid	der's Name and Address	Dat	es of payment	Total amount paid	Amount still	•	r this payment ditor's name
Par	t 4:	Identify Legal Actions, Repossession	ns, an	d Foreclosures				
9.	List a	in 1 year before you filed for bankrupt Il such matters, including personal injury fications, and contract disputes.						
	_	No Yes. Fill in the details.						
		e title e number	Nat	ture of the case	Court or agency		Status of t	he case
10.		in 1 year before you filed for bankrupt k all that apply and fill in the details belo		as any of your prope	erty repossessed, f	oreclosed,	garnished, attache	d, seized, or levied?
	= 1	No. Go to line 11.						
		Yes. Fill in the information below.						
	Cred	ditor Name and Address		scribe the Property			Date	Value of the property
			Exp	olain what happened	d			
11.		in 90 days before you filed for bankru unts or refuse to make a payment bec			luding a bank or fir	nancial inst	itution, set off any	amounts from your
		No						
		Yes. Fill in the details. ditor Name and Address	Des	scribe the action the	creditor took		Date action was	Amount
10	\A/:4b:	in 4 year before you filed for bonkrumt			nuty in the manage	ion of on o	taken	ofit of avaditors a
12.		in 1 year before you filed for bankrupt t-appointed receiver, a custodian, or a			erty in the possess	ion or an as	ssignee for the ben	ent of creditors, a
	_	No						
	Ц,	Yes						
Par	t 5:	List Certain Gifts and Contributions						
13.	_	i <mark>n 2 years before you filed for bank</mark> rup No	otcy, c	lid you give any gift	s with a total value	of more tha	an \$600 per person	?
	_	Yes. Fill in the details for each gift.						
	Gifts	s with a total value of more than \$600 person		Describe the gifts			Dates you gave the gifts	Value
	Pers	son to Whom You Gave the Gift and					J. T.	

Debtor 1

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Deb	or 2 Jessica M Kaaihue Case nun	umber (if known)			
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or each		any gifts or contributions with	a total value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		hat you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you file	ed for bankruptcy, did you lose	e anything because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include the amount to	ance coverage for the loss hat insurance has paid. List pend line 33 of Schedule A/B: Propert		Value of property lost
Par	t 7: List Certain Payments or Transfer		iiile 33 01 <i>3criedule A/B. Froper</i> i	y.	
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid Address	oreparing a bankrup oreparers, or credit cou	tcy petition? unseling agencies for services re		Amount of payment
	Email or website address Person Who Made the Payment, if Not			made	F-19
	Theresa L. Campbell 728 N. Main Rockford, IL 61103			April 2016	\$1,100.00
	Theresa L. Campbell 728 N. Main Rockford, IL 61103			April 2016	\$335.00
	001 Debtorcc	pre-bankr	uptcy credit counseling		\$14.95
17.	Within 1 year before you filed for bankrupromised to help you deal with your cree Do not include any payment or transfer that No	ditors or to make pay	one else acting on your behalf /ments to your creditors?	pay or transfer any prope	rty to anyone who
	Yes. Fill in the details.		and order of a	Defe	
	Person Who Was Paid Address	Description transferred	n and value of any property	Date payment or transfer was made	Amount of payment

John N Kaaihue, III

Debtor 1

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Debtor 2 Jessica M Kaaihue Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number closed, sold, Address (Number, Street, City, State and ZIP instrument before closing or Code) moved, or transfer transferred XXXX-**Associated Bank** April 2015 \$50.00 Checking 612 N. Main □ Savings Rockford, IL 61103 ■ Money Market □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code)

Debtor 1

John N Kaaihue, III

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Debtor 1 **John N Kaaihue, III** Debtor 2 **Jessica M Kaaihue**

Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Information	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	· · · · · · · · · · · · · · · · · · ·	law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.
	No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a t	•		,
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execut	tive of a corporation		
	☐ An owner of at least 5% of the voting or	equity securities of a corporation		

Case 16-81194 Doc 1 Filed 05/13/16 Entered 05/13/16 11:28:45 Desc Main Page 49 of 63 Document John N Kaaihue, III Debtor 1 Debtor 2 Jessica M Kaaihue Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John N Kaaihue, III /s/ Jessica M Kaaihue John N Kaaihue, III Jessica M Kaaihue Signature of Debtor 1 Signature of Debtor 2 Date May 13, 2016 Date May 13, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person

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Fill in this inform	mation to identify your	case:		
Debtor 1	John N Kaaihue,	III		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica M Kaaihu	ie		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _ (if known)				☐ Check if this is an amended filing
				amended illing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	John N Kaaihue, III Jessica M Kaaihue	Case number (if known)	
name:		☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Descrip		Reaffirmation Agreement.	
property securin		☐ Retain the property and [explain]:	
	g dob		
For any ur in the info	rmation below. Do not list real estate le	Leases ou listed in Schedule G: Executory Contracts and Unexpired ases. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's n	name:		□ No
	n of leased		
Property:			☐ Yes
Lessor's n	name:		□ No
	n of leased		-
Property:			☐ Yes
Lessor's n			□ No
Description of leased Property:			□ v
			☐ Yes
Lessor's n			□ No
Description of leased Property:			□ Yes
Lessor's n	name: on of leased		□ No
Property:	iii oi leased		□ Yes
Lessor's n	name: on of leased		□ No
Property:	6. 164664		☐ Yes
Lessor's n	name:		□ Na
	on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indi hat is subject to an unexpired lease.	cated my intention about any property of my estate that sec	ures a debt and any personal
χ /s/ J	ohn N Kaaihue, III	χ /s/ Jessica M Kaaihue	
	n N Kaaihue, III	Jessica M Kaaihue	
Signa	ature of Debtor 1	Signature of Debtor 2	
Date	May 13, 2016	Date May 13, 2016	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81194 Doc 1 Filed 05/13/16 Entered 05/13/16 11:28:45 Desc Main Document Page 56 of 63

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	John N Kaaihue, III e Jessica M Kaaihue		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	1,100.00	
	Prior to the filing of this statement I have received		\$	1,100.00	
	Balance Due		\$	0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
	(1 2/				
5.	■ I have not agreed to share the above-disclosed compensation	ation with any other persor	unless they are men	nbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				law firm. A
6.	6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 				
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, and pleadings or negotiations with creditors regarding the redemption of a vehicle or other asset.					
CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.					
1	May 13, 2016	/s/ Theresa L. Ca			
1	Date	Theresa L. Camp Signature of Attorn			
		Theresa L. Camp			
		728 N. Main Rockford, IL 611	N3		
		815-962-3787 F			
		Name of law firm			

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United States Bankruptcy Court Northern District of Illinois

In re	John N Kaaihue, III Jessica M Kaaihue		Case No.		
		Debtor(s)	Chapter	7	
	VERIFICATION OF CREDITOR MATRIX				
		Number of C	Number of Creditors:		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of (our) knowledge.				
Date:	May 13, 2016	/s/ John N Kaaihue, III John N Kaaihue, III			
		Signature of Debtor			
Date:	May 13, 2016	/s/ Jessica M Kaaihue			
		Jessica M Kaaihue			
		Signature of Debtor			

AFNI P O Box 1637 Southgate, MI 48195

ARS National Services P O Box 463023 Escondido, CA 92046

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cardmemeber services P O Box 790084 Saint Louis, MO 63179

CBE Group 1309 Technology Parkway Cedar Falls, IA 50613

Central Credit Services 20 Corporate Hills Dr. Saint Charles, MO 63301

Central Credit Services 9550 Regency Square Blvd. Jacksonville, FL 32225

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

CMRE Financial Services 3075 E Imperial Hwy Suite 200 Brea, CA 92821 Comenity Bank/Maurices Po Box 182125 Columbus, OH 43218

Commonwealth Edison Attn: Bankruptcy Claims 3 Lincoln Center Oak Brook Terrace, IL 60181

Creditors Protection S Po Box 4115 Rockford, IL 61101

Diversified Consultants, Inc. P O Box 1117 Charlotte, NC 28201

Dynia & Associates 4849 N. Milwaukee Ave., Ste. 801 Chicago, IL 60630

Elan Financial Service Po Box 108 St Louis, MO 63166

ERC P O Box 23870 Jacksonville, FL 32241

Fenton & McGarvey Law Firm 2401 Gault Parkway Louisville, KY 40223

Georgia Inpatient Medicine Assoc. 1401 E. State Street Rockford, IL 61104

Glhegc Po Box 7859 Madison, WI 53707

Global Credit & Collection 5440 N. Cumberland Ave., Ste. 300 Chicago, IL 60656

Great Lakes Higher Educucation Guar Po Box 7859 Madison, WI 53707

IC System, Inc. 444 Highway 96 East P. O. Box 64887 Saint Paul, MN 55164

Infinity Healthcare P O Box 3261 Milwaukee, WI 53201

Iowa Student Loan Attention: Bankruptcy Po Box 7150 Des Moines, IA 50309

Jefferson Capital Systems, LLC 16 Mcleland Rd Saint Cloud, MN 56303

L. J. Ross Associates P O Box 6099 Jackson, MI 49204

Midland Credit Mana P O Box 2121 Warren, MI 48090

Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

Mutual Management Services 7177 Crimson Ridge Dr., Ste. 10 Rockford, IL 61107-6235

National Bond Collection P O Box 1381 Wilkes Barre, PA 18703 Nationwide Credit Corporation P O Box 9156 Alexandria, VA 22304

Northland Group, Inc. P. O. Box390846 Edina, MN 55439

OrthoIL 524 Roxbury Rockford, IL 61107-6000

OSF St. Anthony's Hospital Credit/Collection Department 5666 E. State St. Rockford, IL 61108-2472

Pedatrix Medical Group P O Box 88087 Chicago, IL 60680

Professional Bureau of Collections P O Box 628 Elk Grove, CA 95759

Radiology Consultants of Rockford P. O. Box 4542 Rockford, IL 61110

Rockford Anesthesiologist Associate P. O. Box 4569 Rockford, IL 61110-4569

Rockford Associated Pathologists P O Box 71082 Chicago, IL 60694

Rockford Health Physicians Dept. CH 10862 Palatine, IL 60055-0862

Rockford Memorial Hospital P. O. Box 14125 Rockford, IL 61105-4125

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

Rockford Orthopedic Assoc. 535 Roxbury Rd. Rockford, IL 61107

State Collection Service Po Box 6250 Madison, WI 53716

Swedish American Hospital P. O. Box 4447 Rockford, IL 61110-0948

Swedish American Medical Group 2550 Charles St. P. O. Box 1567 Rockford, IL 61110-0067

Synchrony Bank/PayPal Cr Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Torres Crdit Tcs Inc. Po Box 189 Carlisle, PA 17013

United Recovery Systems P. O. Box 722929 Houston, TX 77272-2929

University of Wisconsin Clinic 1 S. Park St. Madison, WI 53715

University of Wisconsin Hospital 635 Science Drive Madison, WI 53711-1074

Us Bank Cb Disputes Saint Louis, MO 63166

Us Dept of Ed/Great Lakes Education 2401 International Madison, WI 53704

Velocity 1800 Route 34 No., Ste. 404A Wall, NJ 07719

Virtuoso Sourcing Grou 4500 E Cherry Creek Sout Denver, CO 80246